

In re Application of:

AKIO SUGAYA

Appln. No.: 09/784,110

Filed: February 16, 2001

For: INFORMATION PROCESSING APPARATUS  
AND INFORMATION DISPLAY METHOD FOR  
DISPLAYING JOB INFORMATION RELATING  
TO AN OUTPUT JOB

Mail Stop Amendment  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.



Docket No. 03560.002743.

Examiner: M. A. Banankhah

Group Art Unit: 2127

July 2, 2004

RECEIVED

JUL 09 2004

Technology Center 2100

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 35	MINUS	** 42	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 6	MINUS	*** 5	= 0	x \$43 \$86	\$86.00
Fee for Multiple Dependent claims \$145°/\$290						\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 86.00 is enclosed.
- ☐ Charge \$\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the Extension fee for response with a \_\_\_\_-month extension is enclosed.
- ☒ A check in the amount of \$ 180.00 to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
\_\_\_\_\_  
Frank A. DeLucia  
Attorney for Applicant

Registration No. 42,476

FITZPATRICK, CELLA, HARPER & SCINTO  
30 Rockefeller Plaza  
New York, New York 10132-3801  
Facsimile: (212) 218-2200

NYMAIN437591